## OLI 12 2005 APPLICATION DATA SHEET

## **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD_R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	No
Computer Readable Form (CRF)?::	No
Title::	NON-HYGROSCOPIC PHARMACEUTICAL COMPOSITIONS CONTAINING NON-HYDRATED QUINOLINE CARBOXYLIC ACIDS
Attorney Docket Number::	<del>08788.0029US01</del> 85943.8276
Attorney Docket Number::  Request for Early Publication::	<del>08788.0029US01</del> 85943.8276 No
Request for Early Publication::	No
Request for Early Publication::  Request for Non-Publication::	No No
Request for Early Publication::  Request for Non-Publication::  Suggested Drawing Sheets::	No No
Request for Early Publication::  Request for Non-Publication::  Suggested Drawing Sheets::  Total Drawing Sheets::	No No · 1
Request for Early Publication::  Request for Non-Publication::  Suggested Drawing Sheets::  Total Drawing Sheets::  Small Entity::	No No · 1
Request for Early Publication::  Request for Non-Publication::  Suggested Drawing Sheets::  Total Drawing Sheets::  Small Entity::  Latin Name::	No No · 1
Request for Early Publication::  Request for Non-Publication::  Suggested Drawing Sheets::  Total Drawing Sheets::  Small Entity::  Latin Name::  Variety Denomination Name::	No No · 1

Contract or Grant Numbers::					
Secrecy Order in Parent Appl.?::					
Petition Type::					
Applicant Information					
Applicant Authority Type::	Inventor				
Primary Citizenship Country::	Jordan				
Status::	Full Capacity				
Given Name::	Adnan				
Family Name::	BADWAN				
Name Suffix::					
City of Residence::	Amman				
State or Province of Residence::					
Country of Residence::	Jordan				
Street of Mailing Address::	P.O. Box 851674				
City of Mailing Address::	Amman				
State or Province of Mailing Address::					
Country of Mailing Address::	Jordan				
Postal or Zip Code of Mailing Address::	11185				
	•				
Applicant Authority Type::	Inventor				
Primary Citizenship Country::	Jordan				
Status::	Full Capacity				
Given Name::	Lina Najati				
Family Name::	NABULSI				
Name Suffix:					

City of Residence::	Amman
State or Province of Residence::	
Country of Residence::	Jordan
Street of Mailing Address::	P.O. Box 925400
City of Mailing Address::	Amman
State or Province of Mailing Address::	
Country of Mailing Address::	Jordan
Postal or Zip Code of Mailing Address::	11110
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Jordan
Status::	Full Capacity
Given Name::	Mahmoud M.
Family Name::	OMARI
Name Suffix::	
City of Residence::	Amman
State or Province of Residence::	
Country of Residence::	Jordan
Street of Mailing Address::	P.O. Box 836
City of Mailing Address::	Amman
State or Province of Mailing Address::	
Country of Mailing Address::	Jordan

Postal or Zip Code of Mailing Address::

11821

Correspondence Customer::		120 South La Suite 1600	Fitch, Even Tabin & Flannery 120 South LaSalle Street Suite 1600 Chicago, Illinois 60603-3406		
		Cnicago, ilin	1018 00003-3400		
Correspondence Customer Number::		22242	22242		
Representative In	formation				
Representative Customer Number::		22242	22242		
Attorney Name::	Attorney Name::		John Gresens		
Reg. No.::		33,112	33,112		
Domestic Priority Information					
Application::	Continuity Type::	Parent Application::	Parent Filing Date::		
<u> </u>					
Foreign Priority Information					
Country::	Application No.::	Filing Date::	Priority Claimed::		
EP	03006160.0	03/19/03	Yes		
Assignee Informa	tion				
Assignee Name::		The Jordanian Pharm	acception!		
Assignee Ivanie		Manufacturing Co.			
Street of Mailing A	Address::				
City of Mailing Address::		Naor			
State or Province of	of Mailing Address::				
Country of Mailing Address::		Jordan			

11710

Postal or Zip Code of Mailing Address::